

The Impact of Adverse Childhood Experiences on Communication Development of Children Who Are Deaf or Hard of Hearing

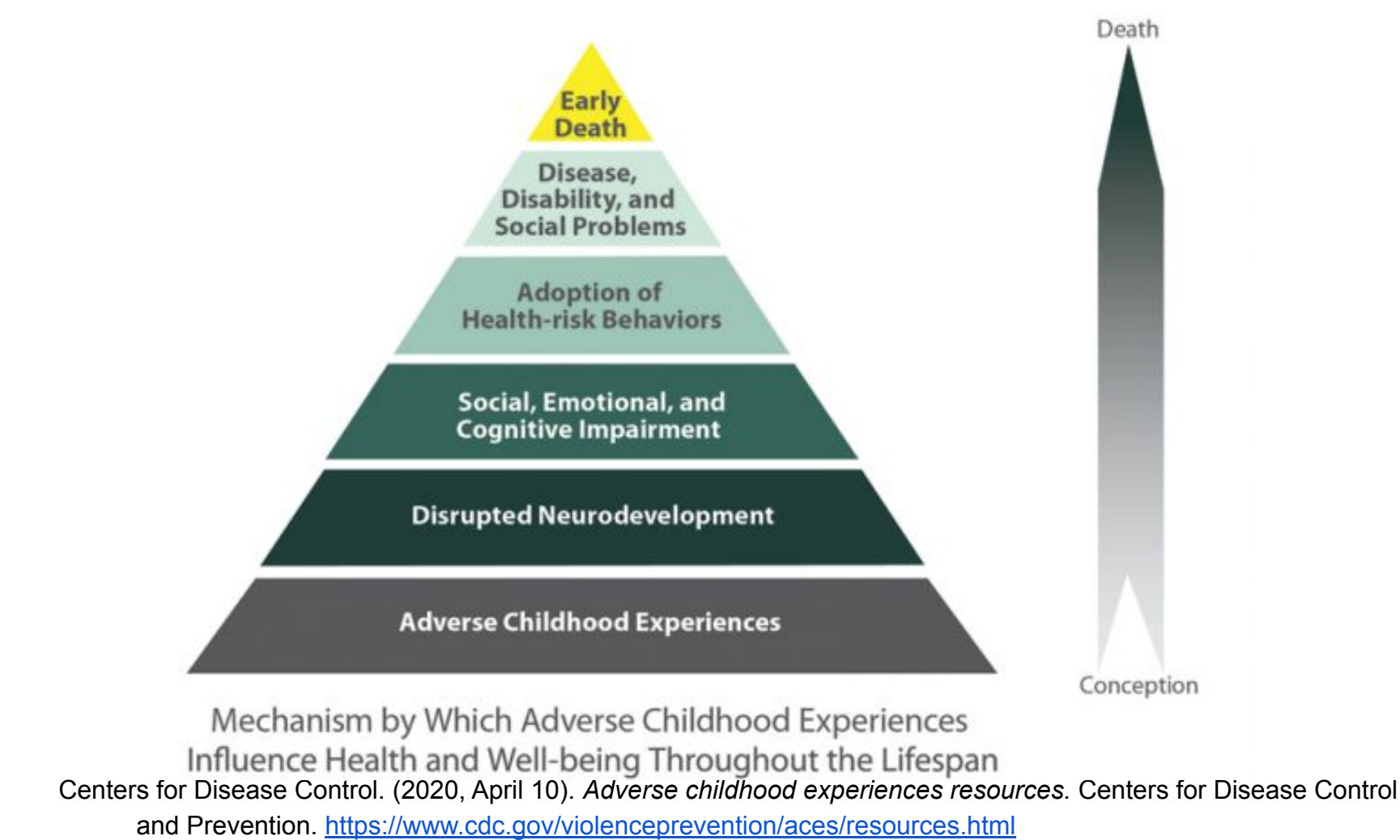
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Impact of ACEs on Communication Development

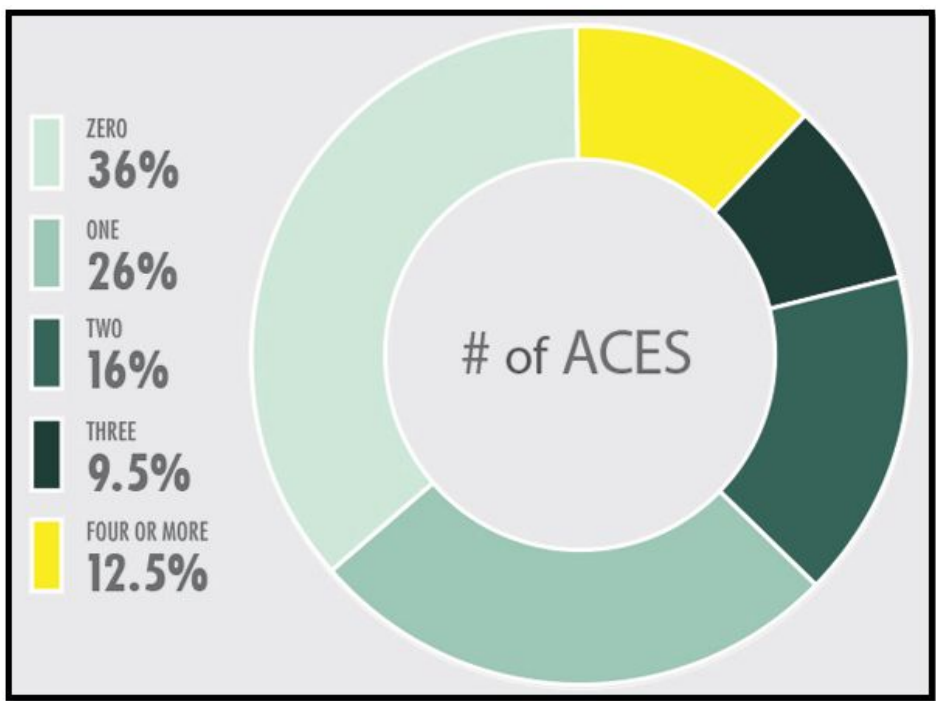
Adverse Childhood Experiences (ACEs) are traumatic events experienced by children between the ages of 0-17 years (Centers for Disease Control and Prevention, 2020). Early adversity can negatively impact communication development in children, especially those who are deaf or hard of hearing (DHH). Positive childhood experiences (PCEs) can lessen the harmful effect of ACEs and serve to promote communication development.

ACEs could be divided into three main categories: abuse, neglect, and family relationships. When these areas are impacted, a child's communication development can be affected. According to Smith, et al. (2018), when children experience abuse, neglect, or lack of responsive and healthy relationships, communication development could be negatively impacted. It is important to understand that children who are experiencing trauma may need a modified language learning environment.



In recent years, research has been conducted on how ACEs can affect a person - not just in their health, but other areas of their life including communication development. According to Harris (2018), patients with four or more ACEs are 32.6 times more likely to be diagnosed with learning problems.

In two separate studies, the communication development of children with ACEs revealed that communication development was impaired. Across all socioeconomic statuses, children with ACEs had lower receptive language, expressive language, and receptive vocabulary than their peers that did not experience early adversity (Lum, et al., 2015). Children with ACEs also presented a syntactic delay of 13 to 16 months. The researchers assessed two groups of children using the PPVT (Peabody Picture Vocabulary Test) and explained that the children with ACEs had a lower overall score when compared to their peers (Eigsti & Cicchetti, 2004). Children who are DHH have a predisposition to delayed communication. When a child who is DHH experiences early adversity, their chance of a communication delay increases significantly. 425 college students (317 typically hearing, 108 DHH) completed a survey regarding their personal adverse experiences prior to age 16. Of the typically hearing students, 49% reported ACEs compared to 77% of the DHH students (Schenkel, et al., 2011). Bailey, et al. (2019) suggest ACEs don't occur alone. If one ACE is present, there is an 87% chance there are two or more.



Centers for Disease Control. (2020, April 10). Adverse childhood experiences resources. Centers for Disease Control and Prevention. <https://www.cdc.gov/violenceprevention/aces/resources.html>

ACEs and PCEs

ACEs Questionnaire

Give one point for each question answer with YES.

Prior to your 18th birthday:

1. Did a parent or other adult in the household often or very often... Swear at you, insult you, put you down, or humiliate you? or Act in a way that made you afraid that you might be physically hurt?
2. Did a parent or other adult in the household often or very often... Push, grab, slap, or throw something at you? Or ever hit you so hard that you had marks or were injured?
3. Did an adult or person at least 5 years older than you ever... Touch or fondle you or have you touch their body in a sexual way? or attempt or have oral, anal, or vaginal intercourse with you?
4. Did you often or very often feel that ... No one in your family loved you or thought you were important or special? or your family didn't look out for each other, feel close to each other, or support each other?
5. Did you often or very often feel that ... You didn't have enough to eat, had to wear dirty clothes, and had no one to protect you? or your parents were too drunk or high to take care of you or take you to the doctor if needed?
6. Were your parents ever separated or divorced?
7. Was your mother or stepmother: Often or very often pushed, grabbed, slapped, or had something thrown at her? Or sometimes, often, or very often kicked, bitten, hit with a fist, or hit with something hard? Or ever repeatedly hit over at least a few minutes or threatened with a gun or knife?
8. Did you live with anyone who was a problem drinker or alcoholic, or who used street drugs?
9. Was a household member depressed or mentally ill, or did a household member attempt suicide?
10. Did a household member go to prison?

Add up your "yes" answers, this is your ACE Score ____.

ACES Too High News. (2020, October 12). *Got your ACE score? Aces Too High.* <https://acestoohigh.com/got-your-ace-score/>

PCEs – Did you...

1. Feel able to talk to your family about feelings?
 2. Feel your family stood by you during difficult times?
 3. Enjoy participating in community traditions?
 4. Feel a sense of belonging in high school?
 5. Feel supported by friends?
 6. Have at least 2 non-parent adults who took genuine interest in you?
 7. Feel safe and protected by an adult in your home?
- Add up your "yes" answers, this is your PCE Score ____.

Bethell, C., Jones, J., Gombojav, N., Linkenbach, J., & Sege, R. (2019). Positive childhood experiences and adult mental and relational health in a statewide sample. *JAMA Pediatrics*, 173(11).

Case Studies

Ben is a 7-year-old boy with bilateral sensorineural moderate-severe hearing loss. He lives with his mom and younger sister. His parents are divorced and sees his father once a month. Ben's teachers are noticing he has difficulties with academics and social interactions with other peers. **ACE Score= 8 PCE Score = 2**

Kailah is a 7-year-old girl with bilateral sensorineural moderate-severe hearing loss. She lives with her mother, step-father, 10-year-old brother, and 4-year-old sister. She sees her grandparents at least once a week. She spends every other week with her father and step-mom. Kailah's teachers have noticed she has difficulty with her academics and asked for additional support for Kailah. **ACE Score = 3 PCE Score= 4**

- What would be some things to keep in mind when working with these learners?
- What strategies might be helpful when working with children with ACEs?
- In what ways would you approach these cases? What would be similar about your approach? Different?
- What are some of the benefits of each child's PCE score and how can you use this to your advantage when working with them?

Clinical Applications

Overall, ACEs impact people of all age, race, and SES and can put individuals at risk for communication delays. Children who are DHH are more likely to experience abuse and neglect when compared to their hearing peers (Schenkel, et al., 2011). Having been identified as deaf/hard of hearing, these children are already at a higher risk for a delay in communication skills. When also experiencing adversity, communication may be further impacted.

Professionals should be actively aware of ACEs when working with children on their caseload. If they know a child has experienced early adversity, they can be better prepared to work with and advocate for that child. Collaboration between professionals is important because they can share best practices in their own field and can provide insight on ways to modify services specific to each child and their family. Professionals can also take steps to help prevent ACEs by using specific strategies that address the needs of children and their families.

Strategies include:

- Home visits to families with newborns
- Parenting training programs
- intimate partner violence prevention
- Social support for parents
- Parent support programs for teens and teen pregnancy prevention programs
- Mental illness and substance abuse treatment
- High quality childcare
- Sufficient income support for lower income families

Adverse childhood experiences - looking at how ACEs affect our lives & society. (n.d.). Veto Violence. Retrieved January 27, 2021, from https://vetoviolence.cdc.gov/apps/phlresource_center_infographic.html

Future research should examine the additional impact ACEs have on the communication abilities of children who are DHH.

References

